
Health Care Committee

HJM 4023

Brief Description: Requesting Congress to enact the Kidney Care Quality Improvement Act of 2005.

Sponsors: Representatives Moeller, Buck, Kessler, DeBolt, Haigh, Talcott, Morrell, Newhouse, Williams, Serben and Eickmeyer.

Brief Summary of Bill

- Requests the United States House of Representatives and United States Senate to pass pending legislation related to patients with kidney disease.

Hearing Date: 1/13/06

Staff: Chris Blake (786-7392).

Background:

End stage renal disease is a failure of the kidneys to less than 10 percent of normal function. Patients experiencing end stage renal disease are not able to treat their kidney failure through diet, medications, or controlling high blood pressure. Dialysis or a kidney transplant are the only treatment options for patients with end stage renal disease.

There are currently two companion measures relating to kidney disease pending before Congress. Under these bills, titled the "Kidney Care Quality Improvement Act of 2005," the Department of Health and Human Services shall:

- review covered surgical procedures and evaluate whether to cover the full range of dialysis access procedures;
- create incentives to increase the use of home dialysis;
- establish a demonstration project to improve the quality of care through financial incentives;
- increase the basic case-mix adjusted payment amounts every year; and
- establish demonstration projects to increase public awareness about prevention and treatment of chronic kidney disease and enable individuals to develop self-management skills.

In addition, patient care dialysis technicians must have completed a training program in the care and treatment of patients in dialysis treatment and hold certification as a dialysis technician.

Summary of Bill:

Legislative findings are made expressing the prevalence of end stage renal disease; the characteristics of patients with the condition; the absence of educational programs to inform patients about treatment options; the lack of coordination among governments, health care providers, educators, and patient groups to identify high-risk populations to improve the treatment of chronic kidney disease; and the failure of the reimbursement system to maintain a sustainable payment level.

The United States House of Representatives and United States Senate are requested to enact H.R. 1298 and S. 635 which relate to Medicare patients with kidney disease.

Appropriation: None.

Fiscal Note: Not requested.